

# Assessment & Goal Setting Training

Training Completion Date \_\_\_\_\_

1. What tasks do you perform for ABE? ☐ Student Orientation ☐ TABE administration  
☐ CASAS administration ☐ Goal Setting ☐ ABE instructor ☐ ESL instructor  
☐ Distance Learning Instructor ☐ Data entry ☐ Administrator  
☐ Professional development specialist

2. Did this training assist you in understanding the **purpose** of the state assessment policy?  
☐ Yes ☐ No

The purpose is: \_\_\_\_\_  
\_\_\_\_\_

3. Did this training assist you in understanding the **application** of the assessment policy to tasks you perform?  
☐ Yes ☐ No

List how you will apply this personally to your job.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Do you have any remaining questions about Idaho's Assessment and Goal Setting Policy?  
☐ Yes ☐ No

If so, please list your questions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. In what way(s) was the training effective? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. How could the training be improved? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_